

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	01/02/2018 17:33
Date Of Accident	17/11/2017 15:25
Exact Location Of Accident	JALAN MASJID TO CHANGI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ4810X
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	REPORTING@AUTOINSURE.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-31572626

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.5 SEDAN EU6 (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995170
Cover Note Number	

Driver

Name of Driver	WILLIAM LAI WEE LIANG (LAI WEILIANG)
NRIC No	S8005337A
Date Of Birth	26/02/1980
Occupation	OUTDOOR
Date Of Driving Pass	09/05/2016
Driving Experience	1 YEAR AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88212626
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	6 MARSILING LANE
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	NO COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes,Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8005337A**



Name
WILLIAM LAI WEE LIANG
(LAI WEILIANG)
赖 威 良

Race
CHINESE

Date of birth
26-02-1980

Sex
M

Country/Place of birth
SINGAPORE

S8005337A

REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number: **S8005337A**
Name:
LAI WEE LIANG
(LAI WEILIANG)

Birth Date: **26 Feb 1980**
Issue Date: **09 May 2016**

002565231F



Accident Sketch Plan

5673291



NRIC No. S8005337A



Date of issue
04-11-2016

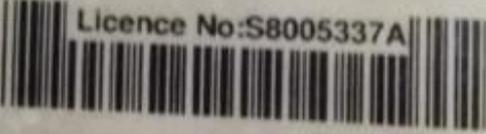
Address
APT BLK 45 CHAI CHEE STREET
#11-168
SINGAPORE 461045

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	17 Jul 2002

NP 428A

Licence No: S8005337A



Accident Sketch Plan

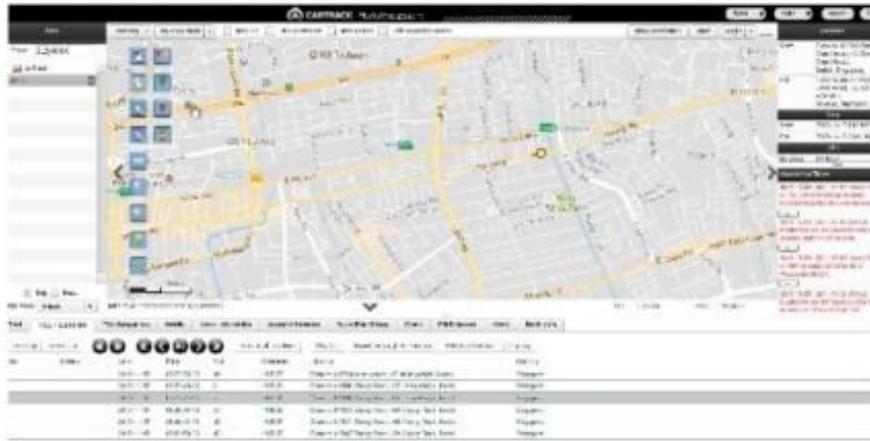


We refer to the alleged accident on 17 November 2017, concerning vehicle with registration number SLQ4810X at/along Jalan Masjid to Changi Road.

We were first made aware of this Accident by your good office. We understand AIG Asia Pacific Insurance Pte Ltd were notified of this Accident through receipt of a claim letter from the Claimant.

We made enquiries concerning the alleged occurrence. At present, the exact details of the Accident remain unclear and are the subject of internal investigations. However, pursuant to the terms of the Policy and on a without prejudice basis to our rights under the Policy, we now submit this notification of alleged accident as the owner of the Vehicle.

GPS findings. Vehicle at accident location.



All our rights are reserved.

Thank you.

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